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Bib Data Sheet

CONFIRMATION NO. 2253

|  |   |                                      |   |   |                                    |
|--|---|--------------------------------------|---|---|------------------------------------|
| <b>SERIAL NUMBER</b><br>10/072,953   | <b>FILING DATE</b><br>02/12/2002<br><b>RULE</b>   | <b>CLASS</b><br>704                  | <b>GROUP ART UNIT</b><br>2644   | <b>ATTORNEY<br/>DOCKET NO.</b><br>P67089US0 |                                    |
| <b>APPLICANTS</b><br>Naoyuki Tokuda, Tokyo, JAPAN;<br>Liang Chen, Prince George City, CANADA;<br>Hiroyuki Sasai, Tokyo, JAPAN;   |   |                                      |   |   |                                    |
| <b>** CONTINUING DATA *****</b>  |   |                                      |   |   |                                    |
| <b>** FOREIGN APPLICATIONS *****</b>   |   |                                      |   |   |                                    |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b><br><b>** 03/11/2002</b>   |   |                                      |   |   |                                    |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature Initials |   | <b>STATE OR<br/>COUNTRY</b><br>JAPAN | <b>SHEETS<br/>DRAWING</b><br>2  | <b>TOTAL<br/>CLAIMS</b><br>10               | <b>INDEPENDENT<br/>CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>00136  |   |                                      |   |   |                                    |
| <b>TITLE</b><br>Computer-assisted memory translation scheme based on template automaton and latent semantic index principle  |   |                                      |   |   |                                    |
| <b>FILING FEE<br/>RECEIVED</b><br>370  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                      | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                    |